## UNITED STATES U.S. SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

SEC Mail Processing

JUL 3 12008

# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

1441812						
OMB APPROVAL						
OMB Number	3235-0076					
Expires:	July 31, 2008					
Estimated averag	je burden					
hours per respon	se:16.00					
SEC US	E ONLY					
Prefix	Serial					
	l					
DATE RECEIVED						
	1					

Washington, DC	
Name of Offering (Dieck if this is an amendment and name has changed, and inc	licate change.)
KeenScreen, Inc. Second Issu	nance of Shares
Filing Under (Check box(es) that apply):   Rule 504 Rule 505 Rule 5	506 Section 4(6) ULOE
Type of Filing: New Filing	
A. BASIC IDENTIFICAT	ION DATA
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and inc	dicate change.)
KeenScreen, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1713 Belmont Ave., Seattle, WA 98122	(858) 442-8111
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Association)
(if different from Executive Offices)	
Brief Description of Business	
Online Advertising Service	
Type of Business Organization	
□ limited partnership, already formed	□ 08056858
☐ business trust ☐ limited partnership, to be formed	
Month Year	PROCESSED
Actual or Estimated Date of Incorporation or Organization: 0 4 0 6	_
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service ab	breviation for State: 47 AUG 0 6 2008
CN for Canada; FN for other foreign ju	risdiction) DE
GENERAL INSTRUCTIONS	THOMSON REUTERS

## GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only reported the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	A. BASIC IDE	NTIFICATION DATA	<u></u>								
2. Enter the information requested for the following	owing:										
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities</li> </ul>											
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>											
Each executive officer and director of	corporate issuers and of c	orporate general and mana	ging partners of p	artnership issuers; and							
Each general and managing partner of	partnership issuers.										
Check Box(es) that Apply:  Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner							
Full Name (Last name first, if individual)  David Parkinson											
Business or Residence Address	(Number and Street, City	v. State. Zin Code)									
1713 Belmont Ave., Seattle, WA 98122	(, valious and buret, on,	y, bane, zip code)									
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)			· · · · · · · · · · · · · · · · · · ·								
Business or Residence Address (Number and Street, City, State, Zip Code)											
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner											
Full Name (Last name first, if individual)		•	1 <del>- 11 - 11 - 11 - 11 - 11 - 11 - 11 -</del>								
Business or Residence Address (Number and Street, City, State, Zip Code)											
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner							
Full Name (Last name first, if individual)											
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)									
Check Box(es) that Apply:  Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)			·								
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)									
Check Box(es) that Apply:	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner							
Full Name (Last name first, if individual)											
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)									
Check Box(es) that Apply:  Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)											
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)									

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B.	INFORMA	TION ABO	UT OFFER	ING				
					•						Yes	No
1.	Has the issuer so	old, or does t	he issuer inte	nd to sell, to	non-accred	ited investors	in this offe	ring?				X
				Answer al	so in Appen	dix, Column	2, if filing u	nder ULOE.				
2.	What is the min	imum investr	nent that will	be accepted	d from any ir	dividual?		•••••			<b>s</b>	X
											Yes	No
3.	Does the offerin	g permit join	ıt own <del>er</del> ship o	of a single u	nit?		•••••				X	_
4.	Enter the inform											
	or similar remu			•								
	listed is an asso of the broker or	-										
	set forth the info			=		uic associa	od persons	or sacir a or	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	a, you may		
Full	Name (Last nam										•	•
1 411	Name (Last ham	c mst, n ma	i vidual j									
Bus	iness or Residenc	e Address		(Number	and Street,	City, State, Z	ip Code)					
Nam	ne of Associated B	roker or Deal	er									
State	es in Which Person	n Listed Has S	Solicited or Int	ends to Solid	cit Purchasers			•				
	(Check "All State			-							Паі	States
[	AL] [AK]	[ AZ ]	[AR]	[ CA ]	[ co ]	[ CT ]	[ DE ]	[DC]	[ FL ]	[ GA ]	[ HI ]	[ ID ]
Ī	IL] [IN]	[ IA ]	[ KS ]	[ KY ]	[ LA ]	[ ME]	[ MD]	[MA]	[ MI ]	[MN]	[ MS ]	[ MO]
•	MT] [NE]	[ NV ]	[ NH ]	[ NJ ]	[ NM ]	[ NY ]	[ NC ]	[ ND ]	[ OH ]	[ OK ]	[ OR ]	[ PA ]
	RI] [SC]	[ SD ]	[ TN ]	[ TX ]	[UT]	[ VT ]	[ VA ]	[ WA]	[_WV]	[ Wi ]	[ WY]	[ PR ]
Full	Name (Last nam	e first, if ind	ividual)									
Bus	iness or Residence	e Address		(Number	and Street,	City, State, Z	Lip Code)					
Nan	ne of Associated B	roker or Deal	<u></u>	·								
State	es in Which Person	n Listed Has S	Solicited or Int	ends to Soli	cit Purchasers	<u> </u>						_
	(Check "All State	es" or check i	ndividual Stat	es)							☐ Al	States
[	AL] [AK]	[ AZ ]	[ AR ]	[ CA ]	[ CO ]	[ CT ]	[ DE ]	[ DC ]	[ FL ]	[ GA ]	[ HI ]	[ ID ]
[	IL ] [ IN ]	[ IA ]	[ KS ]	[ KY ]	[ LA ]	[ ME]	(MD)	[ MA]	[ MI ]	[MN]	[ MS ]	[ MO]
	MT] [NE]	[ NV ]	[ NH ]	[ [ [ [ N ]	[ NM]	[ NY ]	[ NC ]	[ ND ]	[ OH ]	[ OK ]	[ OR ]	[ PA ]
	RI ] [ SC ] Name (Last nam	[ SD ] ne first, if ind	[ TN ] ividual)	[ TX ]	[ ( UT ]	[ VT ]	[ VA ]	[ WA]	[ WV]	[ WI ]	[ WY]	[ PR ]
	(		,									
Bus	iness or Residence	e Address		(Number	r and Street,	City, State, 2	(ip Code)					
Nan	ne of Associated B	roker or Deal	ет					-				
State	es in Which Person	n Listed Has S	Solicited or Int	tends to Soli	cit Purchasers	<del></del>						
	(Check "All State					******************	**************		·····		□ A1	I States
E	AL] [AK]	[ AZ ]	[ AR ]	[ CA ]	[ CO ]	[ CT ]	[ DE ]	[DC]	[ FL ]	[ GA ]	[ HI ]	[ ID ]
	IL] [N]	[ IA ]	[ KS ]	[ KY ]	[ LA ]	[ ME]	[ MD]	[ MA]	[ MI ]	[ MN]	[ MS ]	[ MO]
	MT] [NE]	[ VV ] [ SD ]	[NH] [TN]	[ נא] [ XT ]	[NM] [UT]	[ NY ] [ VT ]	[NC]	[ ND ] [ WA]	[ OH ] [ WV ]	[OK]	[OR]	[PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

۱.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		regate ng Price		t Already old
		•	Ü	\$	
	Debt	<b>3</b>	300	s	200
	Equity	2	300	\$	300
	Convertible Securities (including warrants)	•	<u>.</u>	\$	
	Partnership Interests		<del>.</del>		
		J			
	Other (Specify)	3		-	
	Total	\$	300	2	300
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offering under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
					regate
			ımber restors	_ +	Amount rchases
	Accredited Investors			s	
	Non-accredited Investors		<u>l</u>	· -	300
			<u>.</u>	s	
	Total (for filings under Rule 504 only)			<u> </u>	200
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of the securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of offering	-	pe of curity		- Amount Sold
	Rule 505		<u>.</u>	\$	
	Regulation A			\$	
	Rule 504	<u>C</u>	<u>ommon</u>	<b>\$</b>	10,000
	Total	C	ommon	\$	10,000
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		🗆	<b>s</b>	
	Printing and Engraving Costs			\$	
	Legal Fees			\$	
	Accounting Fees				
	Engineering Fees		_		
	Sales Commissions (specify finders' fees separately)				
	Other Expenses (identify) Filing fees.			-	50
	Total		-	\$	50

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFER	RING PRICE, NUMB	ER OF INVE	STORS, EXPI	ENSES AND	USE OF PRO	CEEDS		
	b. Enter the difference betwee Question I and total expenses furn "adjusted gross	n the aggregate offer ished in response to Pa proceeds	ring price give art C - Question to	en in response on 4.a. This dif the	to Part C - Terence is the issuer."			S	250
5.	Indicate below the amount of the a for each of the purposes shown, and check the box to the left of adjusted gross proceeds to the issue	If the amount for any the estimate. The to-	purpose is not tal of the pays response to Pa	known, furnis ments listed m art C - Ouestion	hran estimate just equal the 4.b above.	. 1 s			
		•				Payments to O Directors, Affiliate	&		yments to Others
	Salaries and fees	·····				\$	(x	s	250
	Purchase of real estate					\$	_		
	Purchase, rental or leasing and inst	allation of machinery	and equipment			<b>\$</b>	t _	]	
	Construction or leasing of plant bu	ildings and facilities				\$	_ []	S	
	Acquisition of other businesses (in offering that may be used in exchapursuant to a merger)	cluding the value of se	curities involve	ed in this ther issuer		,ti		¢	
	Repayment of indebtedness				<b>_</b> ,	s		,	
	Working capital				_	s	·-		
	Other (specify):				_	°			
						Φ	<u> </u>	, • <u> </u>	
			. 1	<u> </u>		\$		. s	
	Column Totals					\$ <i>.</i>	_ [	\$	
	Total Payments Listed (column tot	als added)	*******************	************************************		[X]	\$	250	
			D. FEDERA	L SIGNATUR	RE .				
The con	e issuer has duly caused this notice to b isstitutes an undertaking by the issuer to uer to any non-accredited investor pursu	e signed by the undersig furnish to the U.S. Seet aant to paragraph (b)(2)	ened duly autho mities and Exol of Bule 502.	rized person. If nange Commissi	this notice is fi	led under Rule n request of its	505, the follo	owing signat ormation fur	ture mished by the
	uer (Print or Type)	Signatur	<del>, , , , , , , , , , , , , , , , , , , </del>			Date	***		•
Ke	eenScreen, Inc.	(2/	n/4		.,	July 28, 26	08		
	me of Signer (Print or Type)	Title of S	igner (Print of	l'ype)					
Da	avid Parkinson	Preside	ent & CEO						
				and the second	क्रिकेट प्रमाण इस्ट्रिकेट प्रमाण				
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			ATTI	ENTION					
	Intentional misstaton	anta ay amissiana	<del></del>		al animinal .	.i.	Can 10 II C	C 1001	`

			* 6	
		E. STATE SIGNATUR	3	
1.	Is any party described in 17 CFR 230.26 of such rule?	2 presently subject to any of the disqualification	ion provisions	Yes No X
		See Appendix, Column 5, for state	response.	
2.	The undersigned issuer hereby undertake 239.500) at such times as required by sta	s to furnish to any state administrator of any te law.	state in which this notice is file	d, a notice on Form D (17 CFR
3.	The undersigned issuer hereby undertake	s to furnish to the state administrators, upon	written request, information fur	nished by the issuer to offerees.
4.	Exemption (ULOE) of the state in which	e issuer is familiar with the conditions that n this notice is filed and understands that the een satisfied.	ssuer claiming the availability	o the Uniform Limited Offering of this exemption has the burden of
	e issuer has read this notification and know horized person.	s the contents to be true and has duly caused	this notice to be signed on its b	ehalf by the undersigned duly
İssi	uer (Print or Type)	Signature	Date	
Ke	eenScreen, Inc.	Du	July 28, 200	8
Na	me of Signer (Print or Type)	Title (Print or Type)		<b></b>
n.	anid Dankinson	President & CEO		

#### Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

1	2		3		5 Disqualification				
	Type of security					under State ULOE			
	Intend to sell and aggregate to non-accredited offering price				Type of	investor and		(if yes, attach explanation of	
		s in State	offered in state		amount pur	rchased in State		waiver	granted)
		-Item 1)	(Part C-Item 1)		(Part	C-Item 2)		(Part E	
•				Number of Accredited		Number of Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA	·								
со						<u></u>			
CT									
DE					1				
DC									
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GA					Y				
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MN					ļ				
MS					<del></del>				
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### APPENDIX

1		2	3	4 5 Disqualification						
			Type of security							
		to sell	and aggregate							
		ccredited s in State	offering price offered in state			investor and rchased in State		explanation of waiver granted)		
		-Item 1)	(Part C-Item 1)			C-Item 2)		(Part E-		
			, ,	Number of		Number of			·	
State	Yes	No		Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No	
MT	1 65	NO		Investors	Amount	Investors	Amount	103	110	
NE										
NV					_					
NH										
NJ										
NM						. <u>-</u> .,	<del> -</del>			
NY			· · · · · · · · · · · · · · · · · · ·						<del>-</del>	
NC										
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VA										
WA	х		Common Stock \$300	0	0	1	\$300		0	
wv					ļ		$  \sigma$	ala		
WI										
WY										